



ADDENDUM #2 RFP-2022-BDAS-01-SUBST

(Changes to RFP-2022-BDAS-01-SUBST are in **bold, underlined and italicized** text in order to enable vendors to quickly recognize changes in paragraphs and/or wording.)

On July 20, 2021, the New Hampshire Department of Health and Human Services published a Request for Proposals, soliciting proposals for the provision of Substance Use Disorder Treatment and Recovery Support Services to help individuals stop or reduce substance misuse; improve their physical and mental health and social function; and reduce risk for recurrence of substance misuse.

The Department is publishing this addendum to:

1. Delete and replace Section 3, Statement of Work, Subsection 3.3, Staffing, Paragraph 3.3.1, Subparagraph 3.3.1.2, Part 3.3.1.2.4, Subpart 3.3.1.2.4.2.1 with the following:

3.3.1.2.4.2.1 A maximum of **five** (5) clients to one (1) Milieu/Line Staff Member present with clients during awake hours, when clients are not participating in a group or individual session; and

2. Add Section 3, Statement of Work, Subsection 3.2. Scope of Services, Paragraph 3.2.21 as follows:

3.2.21 State Opioid Response (SOR) Grant Standards

3.2.21.1 The selected vendor(s) must establish formal information sharing and referral agreements with the Doorways in compliance with all applicable confidentiality laws, including 42 CFR Part 2 in order to receive payments for services funded with SOR resources.

3.2.21.2 The Department must be able to verify that individual referrals to the Doorways have been completed by the selected vendor(s) prior to accepting invoices for services provided through SOR funded initiatives.

3.2.21.3 The selected vendor(s) must ensure individuals receiving services rendered from SOR funds have a documented history or current diagnoses of Opioid Use Disorder (OUD) or Stimulant Use Disorders.



3.2.21.4 The selected vendor(s) must coordinate ongoing care for individuals with documented history or current diagnoses of OUD or Stimulant Use Disorder, receiving services rendered from SOR funds, with the Doorways in accordance with 42 CFR Part 2.

3.2.21.5 The selected vendor(s) must provide Medication Assisted Treatment (MAT) only with FDA-approved MAT for Opioid Use Disorder (OUD), which includes:

3.2.21.5.1 Methadone.

3.2.21.5.2 Buprenorphine products including:

3.2.21.5.2.1 Single-entity buprenorphine products;

3.2.21.5.2.2 Buprenorphine/naloxone tablets;

3.2.21.5.2.3 Buprenorphine/naloxone films; and

3.2.21.5.2.4 Buprenorphine/naloxone buccal preparations.

3.2.21.6 The selected vendor(s) must provide medical withdrawal management services supported by SOR funds only when the withdrawal management service is accompanied by the use of injectable extended-release naltrexone, as clinically appropriate.

3.2.21.7 The selected vendor(s) must ensure individuals receiving financial aid for recovery housing utilizing SOR funds are in a recovery housing facility that aligns with the National Alliance for Recovery Residences standards and is registered with the State of New Hampshire, Bureau of Drug and Alcohol Services in accordance with New Hampshire Administrative Rules, He-A 305, Voluntary Registry for Recovery Houses.

3.2.21.8 The selected vendor(s) must accept individuals on MAT and facilitate access to MAT on-site or through referrals for all individuals supported with SOR funds, as clinically appropriate.



3.2.21.9 The selected vendor(s) must ensure individuals who refuse to consent to information sharing with the Doorways do not receive services utilizing SOR funding.

3.2.21.10 The selected vendor(s) must ensure individuals who rescind consent to information sharing with the Doorway do not receive any additional services utilizing SOR funding.

3.2.21.11 Room and Board

3.2.21.11.1 The selected vendor(s) may invoice the Department, in a format as directed and approved by the Department, for up to \$100 per day for Room and Board Services for individuals receiving Medicaid who also have a diagnosed OUD or Stimulant Use Disorder and who are in a residential or transitional living level of care.